



"FEE ADDRESS" INDICATION FORM

Address to:
Commissioner of Patents and Trademarks
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Please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the following address:

EDWARD FRIELING
5670 WILLOW CREEK COURT
DELRAY BEACH, FL 33484

Payor Number if assigned _____

Payor's Telephone Number 561 496-2173

in the following listed application(s) or patent(s) for which the Issue Fee has been paid.

PATENT NUMBER (if known)	APPLICATION NUMBER	PATENT DATE (if known)	U.S. FILING DATE
	09/197,987		11/23/98

(check one)

- ☐ Patentee
☐ Owner of record
☒ Owner's attorney or agent of record 30,448
(Reg. No.)
☐ Assignment recorded at Reel _____ Frame _____

Alvin S. Blum

Signature

ALVIN S. BLUM #30,448
Typed or printed name

Date

Address of signer:

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